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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA ⁻	TION		
1 Olliwi 1	(See instructions))		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Sarah PAC				
ADDRESS (number and s	PO Box 7711			
(Check if address is changed)				
	Arlington		LYA L	22207 -
	C	CITY_	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-ma	ail address)		
(Check if address is changed)	tcrawford16@verizon.i	net 		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address is changed)	www.SarahPAC.com			
2. DATE 0 2	/ 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER C	C00458588	7	
4 10 THE STATEM	ENT NEW (N) OR	X AMENDED (A)		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my knowle	edge and belief it is true, correct a	and complete	
Type or Print Name of	Treasurer Timothy Crawford			
Signature of Treasurer	Electronically Filed by Timothy Cra	awford	Date 0 2	D 25 / Y Y 2010
NOTE: Submission of fals	se, erroneous, or incomplete information may s	subject the person signing this Sta	itement to the penalt	ies of 2 U.S.C. §437g.
	ANY CHANGE IN INFORMATION	ON SHOULD BE REPORTED	WITHIN 10 DAYS	<u> </u>
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)